

**STATE OF MICHIGAN
DEPARTMENT OF LICENSING & REGULATORY AFFAIRS
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
MICHIGAN TAX TRIBUNAL
SMALL CLAIMS DIVISION**

**NON-PROPERTY TAX
APPEAL PETITION FORM**

MTT DOCKET NO. _____

Section 1: Petitioner's Contact Information

First Name	M.I.	Last Name
Mailing Address (No., Street, P.O. Box or Rural Route)		
City or Town	State	ZIP Code
Telephone Number	Fax Number	
E-mail Address		

Section 2: Attorney/Authorized Representative's Contact Information

First Name	M.I.	Last Name
Firm Name (if any)		
Address (No., Street, P.O. Box or Rural Route)		
City or Town	State	ZIP Code
Telephone Number	Fax Number	
E-mail Address		

Section 3: Please Explain the Reason for this Appeal

*Please provide the statutory authority for the imposition of the tax.

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Section 4: Assessment Information

Type of Tax Assessment(s):	Assessment Number(s):
Check all that is being appealed: <input type="checkbox"/> Tax <input type="checkbox"/> Interest <input type="checkbox"/> Penalty <input type="checkbox"/> Refund of taxes paid in the amount of \$	
Check what action prompted this appeal: <input type="checkbox"/> Final Assessment <input type="checkbox"/> Letter Denying Refund <input type="checkbox"/> Other (Check one)	
If "other", please explain:	
List the Amounts being levied: Tax _____ Interest _____ Penalty _____	List the refund sought:
List your Contentions: Tax _____ Interest _____ Penalty _____	

Signature (the petition will not be accepted unless it is signed):

Petitioner's Signature: /s/
Attorney or Authorized Agent's Signature: /s/

Fee Information:

A fee of \$100.00 is required for the filing of a Non-Property Tax Appeal.
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